# Town of Vernon's Arctic Splash WHAT'S YOUR NUMBER?

The Vernon Parks and Recreation Department is challenging everyone to see how many Vernon children you can send to summer camp. Every summer the Vernon Parks and Recreation Department gives out an average of \$25,000 in fee reductions and full week scholarships to children and families of the Vernon community to send their children to summer camp who might not otherwise get a chance. A \$75 donation will send one child to summer camp for a full week where they will meet new friends, meet new role models, play games, swim, do arts and crafts, and much more. So we ask you, how many children will you send to summer camp?

### WHAT'S YOUR NUMBER?

Awards will be handed out for the following categories:

- Most money raised by an individual
- Best individual costume
- Best team costume

To be eligible for monies raised prizes, all donations must be received by Wednesday, December 4

### Bon Fire (weather permitting) and Refreshments

#### **Event Information:**

The Vernon Parks and Recreation Department will be holding it's 5th Annual Arctic Splash Fundraiser to benefit the Send-A-Kid to Camp Fund December 7, 2013 at 1:00 p.m. (Rain Date: December 8th at 1:00 pm) at Valley Falls Park.

Date: December 7, 2013 (Rain Date: December 8th)
Location: Valley Falls Park, 300 Valley Falls Rd.

## Say "Yes" to Vernon's Arctic Splash!

Please fill out the participation form and mail it to: The Vernon Parks and Recreation Department; 120 South Street, Vernon, CT 06066

Participants Name				
Participant's Telephone Number				
Mailing Address				
Contact Email Address				
Shirt size (circle one): AS	AM	$\mathbf{AL}$	AXL	AXXL

The undersigned parent, guardian, or participant does grant permission to the named individual/s to participate in the Vernon Parks and Recreation Department above named program/s. The undersigned does hereby waive, absolve, indemnify, and agree to hold harmless the Town of Vernon Parks and Recreation Department and all other sponsors and supervisors of the above said program/s. As a parent or guardian of the above said participant/s, I realize there are inherent risks involved in physical activity. Pictures taken of my child may be used for publicity by the Vernon Parks and Recreation Department.

Participant's Signature (parent's signature if under the age of 18)	Date	



Name	<b>Contact Information</b>	Donation	(
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